





OF THE

# Medical Officer of Health

for 1966

TOGETHER WITH

# THE ANNUAL REPORT

OF THE

Chief Public Health Inspector



#### **HEALTH COMMITTEE**

1966

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#### STAFF OF THE PUBLIC HEALTH DEPARTMENT

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Deputy Medical Officer of Health:
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Chief Public Health Inspector: H. C. REEVE, M.A.P.H.I.

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A. J. AVON, M.A.P.H.I., M.R.S.H.

Senior Meat Inspector

R. SUTTON, M.A.P.H.I.

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F. SMITH, M.A.P.H.I.

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Clerks: Mrs. M. J. Woodbridge; Miss J. Tarry; Miss E. D. Saunders.

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GUILDFORD.

# **FOREWORD**

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE BOROUGH OF GUILDFORD

MR. MAYOR, LADIES AND GENTLEMEN,

Influenza was widespread in Guildford and its surrounding districts during the first months of the year, but fortunately it did not assume the epidemic proportions reached in the North of England, and was of a mild type. One third of all new claims made to the Ministry of National Insurance (now the Ministry of Social Security) were on account of Influenza. Many people tend to regard Influenza too lightly, and it cannot be over-emphasised that adequate rest in bed and a few days' convalescence before returning to work is the only sure way of avoiding complications and the mental and physical depression so often encountered otherwise.

Notifications of other infectious diseases were minimal, even measles claimed only small numbers; 1966 was not a measles year, there having been many cases in 1965, but measles continued, most unusually, right through the summer.

During March there occurred one of those sad but fortunately very infrequent occasions when it became necessary to seek a Magistrate's Order for the compulsory removal to Hospital of an old person found living under tragic and filthy conditions who was in need of Hospital treatment but would not go voluntarily. Such cases are as distressing for the Medical Officer of Health and his staff as for the patient concerned, but usually end, as in this case, with the person concerned being grateful for the care, attention, treatment and good feeding which could only be given in Hospital. Arising from this, the Council authorised the necessary expenditure in such cases for the cleansing of dirty houses, and this authority is invaluable.

At about this time the Council engaged the services of a firm of Organisation and Methods Consultants, and their expert made suggestions, which have been carried out, for improved efficiency and avoidance of some clerical activities which could no longer be justified. One of the recommendations of the O. & M. Team confirmed a decision already taken by the Council that there should

be a Senior Clerk in charge of the Juniors in the Health Inspector's Office, to be implemented when the opportunity arose.

With the Council's approval, the Health Department put on an exhibition at the Surrey County Show and this was highly successful. Many thousands of people saw the stand which was designed to illustrate the work of the Council's Health Department relating to milk, meat, and pest control, and which created a very favourable impression. The competition by the Guildford Hygienic Food Traders Guild attracted about 800 entrants for the prizes, and some of the results were excellent. It is a pleasure to record my thanks to Dr. Richards, Mr. Reeve, and all the members of the Health Department staff who worked so hard on this project. The County Health Department also staged an excellent exhibit.

The Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966 were considered by the Health Committee at their September meeting. These Regulations lay down requirements as to Food Hygiene in respect of markets, stalls, and delivery vehicles, and came into force on 1st January, 1967. These Regulations will result in a vastly improved North Street Market, and it is pleasant to put on record that at all the meetings with the Stall-Holders' representatives, the latter have shown the greatest good-will and co-operation.

During the autumn, the Health Committee received an excellent report from their Chief Public Health Inspector on the desirability of creating Guildford's first Smoke Control area in Guildford Park. This area was chosen for a number of good reasons, including the fact that the Royal Surrey County Hospital is, and the University will be, in the area. Public reaction during the survey was most favourable and many residents expressed strong approval of the idea of Clean Air. Our smoke recording apparatus has proved that parts of Guildford have a worse smoke problem than many more industrial towns such as Coventry. Portsmouth, Reading and Woolwich. The Council approved the report but unfortunately the National Financial Squeeze caused the deletion from estimates 1967/68 of the necessary funds. It is to be hoped that a start can be made in the financial year 1968/69 on what could be of great benefit to Guildford residents.

It is a pleasure to be able to record that, from the Public Health angle, fortunately no serious epidemics or untoward incidents occurred. But the serious problem of housing remains, and as always, is a cause of great concern to workers in the Public Health field, as indeed it is to the Council as a whole: but there is no short answer.

I should like to thank the Chairman and Members of the Health Committee for their very real interest in the work of the Department and I am grateful for their support. I also acknowledge with sincere thanks the willing help at all times of Dr.

Richards, Mr. Reeve and all the members of the Health Department staff, and I am, as always, grateful to the Officers of other Departments for their unfailing advice and help.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

A. B. R. FINN, MEDICAL OFFICER OF HEALTH.

# STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (in acres) 7,322.

Registrar-General's estimate of the resident population mid-1966, civilian and members of the Armed Forces. Total: 55,200.

Number of inhabited houses and flats (31st March, 1967) according to the Rate Books: 17,996; shops with private dwelling accommodation: 232.

Rateable Value on 31st March, 1967: £4,041,296.

Sum represented by Penny Rate (31st March, 1967): £16,500.

#### EXTRACTS FROM VITAL STATISTICS OF THE YEAR

Live Births—	Guildford Borough	England & Wales
Number	. 844	850,000
Rate per 1,000 population	14.5	17.7
Illegitimate Live Births (per cent of total live births	8.1	
Stillbirths—		
Number	. 11	13,300
Rate per 1,000 total live and still births	. 12.9	15.4
Total Live and Still Births	. 855	863,300
Infant Deaths (deaths under one year)	. 23	16,147
Infant Mortality Rates—		
Total infant deaths per 1,000 total live births.	. 27.3	19.0
Legitimate infant deaths per 1,000 legitimate liv	20.4	
Illegitimate infant deaths per 1,000 illegitimat	1 4 7	
Neo-natal Mortality Rate (deaths under four week per 1,000 total live births)	47.0	12.9
Early Neo-natal Mortality Rate (deaths under on week per 1,000 total live births)		11.1
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live an	d 20.2	26.2
still births)	. 29.2	26.3
Maternal Mortality (including abortion)—		
Number of deaths		
Rate per 1,000 total live and still births		

The general Birth Rate for the Borough was 14.5 per 1,000 of the population, a lower figure than for 1965 (15.3), and the rate for England and Wales, which was 17.7.

The general Death Rate for Guildford was 10.5 per 1,000 of the population as compared with 9.7 in 1965. The National figure was 11.7.

Deaths. A very high proportion of all deaths occurred at age 65 or over, namely, 460 out of 616, which is 3 out of 4: 160 women and 137 men died aged 75 or over. The continual increase in our aged in the population is a constant concern to those who have to try to provide services for the elderly: these services, in many cases through lack of staff, e.g. home helps and nurses in hospital, cannot cope with this demand adequately. The elderly, with the aid of modern drugs, now survive the infections such as pneumonia which used to carry them off. In some cases, they survive to "exist" rather than to live.

As always, diseases of the heart and arteries were the biggest single cause of death, being responsible for half the deaths, as last year. Coronary artery disease of the heart (coronary thrombosis) caused 128 deaths, more than one-fifth of the total, and is particularly common in late middle age in men who overwork, overeat and take insufficient regular exercise: in women it usually occurs only in old age.

Cancer is a scourge which is still very much with us and is well known to be the cause of much distress to both the patient and the family, resulting as it so often does in the loss of someone in the prime of life. It remains the second biggest cause of death, 75 males and 49 females, a total of 124.

Cancer of the lung caused 26 deaths (18 in 1965) of which all but three were in males and all but three over the age of 55. Cigarette smoking is a factor in the causation of lung cancer, especially in those who smoke more than 15 per day. The prospects of making a "safe" cigarette cannot, in my view, be relied upon. There is no evidence that cigars or pipes are harmful in relation to lung cancer.

There have been no maternal deaths for nine years, a tribute to those engaged in ante and post natal care and obstetrics.

Accidents involving motor vehicles numbered 10, and all other accidents 12: it is tragic how little impact road accident figures make on road users.

Infant Mortality. As regards infants under one year old, the number of deaths, 23, was more than last year (13). There were 5 deaths due to premature birth (7 in 1965) and these babies survived for one day or less.

The other causes of infant deaths were:-

Abnormalities of Pregnancy or Labour 5 (survived for 1 day or less)

Congenital Abnormality of the Infant 8 (survived for 4 months or less)

Acute Respiratory Infections ... 5 (age range 1 week to 1 year)

The number of deaths of infants under one year of age per 1,000 live births gives the Infant Mortality Rate. For Guildford this was 27.3, compared with the National figure of 19.0, and last year's Guildford figure of 14.7.

It is to be hoped that this exceptionally unfavourable Infant Mortality Rate will not be repeated: a close scrutiny of the details of the individual deaths does not suggest any one common factor at fault. Guildford's annual figures are usually better than the National figure: last year's was perhaps so good as to be inevitably exceeded.

Old People's Welfare. The elderly citizens of Guildford are very fortunate compared with many other places in the country in the care available to them through the Old People's Welfare Council, the W.R.V.S. and from public-spirited residents of the town, who give their services in an effort to relieve the burdens of sickness, poverty and loneliness which are so often the legacy of old age. The Old People's Welfare Centre in Friary Square continues to be used to the fullest extent and is, in fact, too small now for any new projects to be undertaken, however desirable these may be. In common with most other areas in the country, the number of elderly persons living in the Borough is steadily increasing and more interest is required from the community as a whole if the elderly are to receive all the care they need. The mounting numbers of housebound people means that more Visitors are required to cope with this very important aspect in the welfare of old people. Visitors do a marvellous job in that they alleviate the loneliness and insecurity experienced by so many old people, and which may have serious consequences.

Geriatric Health Visitor. Miss Lee continued her good work in this capacity. During November and December, 1966, when she was absent on special leave, the work was carried on as far as possible on a part-time basis by Miss J. M. Head, who is employed in other areas in the County, and our thanks are due to her. The number of new patients visited in the Borough during 1966 was 206 and visits to these, former patients and relatives, totalled 957 (1,251 in 1965). As mentioned in previous reports, the work of the Geriatric Health Visitor is made most difficult by the inadequacy of the services available to old people in the way of hospital beds, places in County Welfare Homes and inability to provide an efficient domiciliary service owing to an insufficient number of home helps.

Day Hospital. Here again, the service available is inadequate for the number of calls made on it, despite the fact that the Day Hospital is making every effort to prevent the necessity for inpatient treatment by providing debilitated elderly people with hospital care for a day or two per week, and they return to their homes at night.

"Help the Disabled Week." An Exhibition of Aids and General Occupational Therapy arranged by the Occupational Therapy Unit of the County Council on behalf of the Voluntary Association for Surrey Disabled was held in premises in Friary Street, Guildford, by kind permission of Messrs. Fogwills Ltd., from 3rd-8th October, 1966. The Exhibition was an outstanding success and was considered by the organisers to be one of the best they had had to date, the premises being most suitable and well placed. It was estimated that between 400/500 people attended.

Meals on Wheels. This work continues to increase, 12,806 meals being delivered (79 more than 1965) to 96 old people during 1966, thus demanding more time to be given by the ever-willing members of the W.R.V.S., whose services are deployed in so many other ways, including sales of Welfare Foods, the Mobile Library Service and the Clothing Service.

Family Planning Association. Family Planning Clinics are held in the Out-Patients' Department at St. Luke's Hospital every Monday from 5–6.30 p.m. and every Friday from 6–7.45 p.m. Appointments are necessary and these may be made by telephone at the Hospital during Clinic times (Guildford 62851) or through the Appointments Secretary (Guildford 4235). The services of this Association are available to all and include the furtherance of knowledge and the giving of practical advice on the proper spacing of families. Advice can be given to those about to enter matrimony as well as to married couples. The service was extended during the year under review to include cervical cytology.

Marriage Guidance Council. The Headquarters of the Guild-ford Marriage Guidance Council are at 234, High Street, but applications for appointments should be made through the Appointments Secretary (Telephone No. Guildford 2633). The Marriage Guidance Council exists to help people and the earnest endeavour of the counsellors is to offer a friendly welcome to all who seek advice, whether it be in respect of a marriage in danger of disruption or to couples about to enter matrimony. The work is carried out in the strictest confidence and can only be undertaken at the direct personal request of the parties concerned. Education counselling is carried out at Schools and Colleges, Youth Clubs, at parents' meetings and meetings for engaged couples. The year has seen increasing integration between the education counsellors and marriage counsellors in that several of them are going to take the combined training.

Laboratory Facilities. Acknowledgment is due and very glady given in respect of the excellent services of Dr. Cook, Director of the Public Health Laboratory at Guildford: these are of inestimable value in the preventive medicine field.

# Guildford Deaths in 1966

	Guiutotu Deaths in	1700		
	Cause of Death	Males	Females	Total
1.		—	_	
2.	Tuberculosis, Other	—		_
3.	Syphilitic Disease	—		
4.	Diphtheria		-	
5.	Whooping Cough	—	_	
6.	Meningoccocal Infections	—	1	1
7.	Acute Poliomyelitis	—		_
8.	Measles	—		
9.	Other Infective and Parasitic Diseases	1	1	2
10.	Cancer of Stomach	6	4	10
11.	Cancer of Lung and Bronchus	23	3	26
12.	Cancer of Breast	—	11	11
13.	Cancer of Uterus	—	3	3
14.	Cancer of other areas	46	28	74
15.	Leukaemia, Aleukaemia	2	2	4
16.	Diabetes	—	2	2
17.	Vascular Lesions of Nervous System	35	62	97
18.	Coronary Disease, Angina	· 76	52	128
19.	Hypertension with Heart Disease	4	4	8
20.	Other Heart Disease	19	32	51
21.	Other Circulatory Disease	19	18	37
22.	Influenza	2	2	4
23.	Pneumonia	20	15	35
24.	Bronchitis	31	. 7	38
25.	Other Diseases of Respiratory System	3	1	4
26.	Ulcer of Stomach and Duodenum	2	1	3
27.	Gastritis, Enteritis and Diarrhoea	—	3	3
28.	Nephritis and Nephrosis	2	1	3
29.	Hyperplasia of Prostate	2		2
30.	Pregnancy, Childbirth, Abortion	—	_	
31.	Congenital Malformations	1	1	2
32.	Other Defined and Ill-defined Diseases	28	16	44
33.	Motor Vehicle Accidents	7	3	10
34.	All other Accidents	9	3	12
35.	Suicide	1	1	2
36.	Homicide and Operations of War	—	_	_
	43-2			
	Totals	339	277	616

10

Birth Rate, Death Rate and Analysis of Mortality in the Year 1966

	Rate 1	Rate per 1,000 Population.		Annual De	ath Rate	per 1,000	Annual Death Rate per 1,000 Population		Rate per 1,000 Live Births.
	Live Births.	Still Births.	All Causes.	Acute Poliomyelitis.	Pneumonia	Whooping Cough.	Diphtheria.	Influenza.	Total Deaths under I year.
England and Wales	17.7	0.3	11.7	0.0	6.0	0.0	0.0	0.1	19.0
GUILDFORD	14.5	0.2	10.5	0.0	9.0	0.0	0.0	0.1	27.3

Ambulance Service. The St. John Ambulance Brigade, Borough of Guildford Corps, has completed their first full year of duty since terminating their agency with the Surrey County Council. The Corps has retained two ambulances manned by voluntary crews which supply a supplementary service to that operated by the Surrey County Council. These vehicles are also used in conjunction with public duties at shows and for patients preferring to be moved privately outside the National Health Scheme.

The following summary gives the work of the Borough of Guildford Corps during 1966:—

a minimizer of the during	.,					
		Public	_		Hospital	Miscel-
	No. of Members	Duty '	Fransport Hours	Escorts	and Clinic Hours	Hours
Corne	9	200	330		60	960
No. 1 Ambulance Division	10	242	330			700
No. 2 Ambulance Division	34	1499	1468			464
Nr ' D'''	32	811	223	189	31	204
No. 1 Ambulance	34	011	223	107	31	204
Cadet Division	26	76	82	-		84
No. 2 Ambulance	20	70	02			04
Cadet Division	31	388	214			484
No. 1 Nursing	J1	300	214			101
Cadet Division	46	180				
No. 2 Nursing	40	100				
Cadet Division	27	105				
Cudet Bivision		105				
Total	215	3501	2317	189	91	2196
	Total 1	Hours 8	204			
Cases treated on Pub	lic Dut	ies			31	7
Cases treated off Pul					30	0
Medical Comforts (ar					40	4
				,		
	Transp	ort Du	ities			
Number of patients remove	:d:—			Pati	ients 1	Mileage
For Surrey County Co					180	3088
T . T					15	1290
O DII' D'					20	1533
on ruone bunes		•••				

Nursing in the Home. This work is carried out by District Nurses employed by the Surrey County Council working from the Queen's Nurses' Home, Stoughton. There is also a Male Nurse giving valuable service. There are two group practices with Staff attached working from doctors' surgeries. The use of nursing auxiliaries is valued in assisting trained staff.

Totals ... ...

215

5911

# Children 0-5 Years Nursed by District Nurses

		No. of Cases	Visits Paid
Skin Other Diseases	 	 $\begin{bmatrix} \dots & 1 \\ \dots & 36 \end{bmatrix}$	146
		37	146

District Cases				
Midwifery		Cases		Visits
Domiciliary Deliveries		138		2937
Hospital Discharges Transferred from St. Luke's Hospital Transferred from Jarvis Maternity Home Transferred from Mount Alvernia Nursing Home	163 20 4		2844 169 29	
Transferred from Farnham Hospital Transferred from Frimley Maternity	Nil		29	
Hospital Transferred from Aldershot Transferred from Chobham Transferred from Wales	1 2 1	192	10 17 20 3	3092
Grand Total		330		6029
Deliveries in other areas by Guildford Staff:  Worplesdon  Godalming  Bramley  Shalford	7 -5 2	14		
Hospital Referrals—Ante-Natal	_	8		126
Ante-natal Clinic Number of sessions Number of General Practitioner Sessions Number of Attendances Number of Bookings Relaxation and Mothercraft General Work (including General Practitioner	45 13 436 118 30			

Maternity Provision. Fifty-four beds are provided at St. Luke's Hospital, where a total of 1,512 births took place in 1966 (1,571 in 1965).

1610

34162

Mount Alvernia Nursing Home offers 25 maternity beds and a total of 503 births took place there in 1966 (435 in 1965).

At the Jarvis Maternity Home, where 13 beds are available,

278 births took place in 1966 (304 in 1965).

There were 2,293 institutional births in 1966 (720 residents and 1,573 non-residents) and 124 domiciliary births in Guildford, making a total of 2,417 births.

Notification of Births. There were 443 male and 401 female births to residents notified, a total of 844 (883 in 1965), and 11 still births (9 in 1965).

Births to residents took place as follows:-

St. Luke's Hospital		 	 481 )	
		 	 151	85.2%
Mount Alvernia Nursing I	Home	 	 88	
Home		 	 124	14.8 %

Clinics and Treatment Centres (see inside back cover).

Hospital Provision. The South-West Metropolitan Regional Hospital Board maintains two Hospitals in Guildford—

- (i) St. Luke's Hospital, Warren Road, Guildford, offers 334 general, six private and eight Emergency Medical Service beds. Accommodation exists for general medicine, general surgery, dermatology, obstetrics and gynæcology, pædiatrics, including newly-born babies requiring special care who are nursed in a Special Care Unit, chronic sick and radiotherapy. The Hospital trains Nurses for the S.R.N., Part 1 S.C.M., and during 1967 will start courses for Enrolled Nurses. In addition, training is available for Laboratory Technicians, Student Radiographers and Operating Theatre Technicians. During 1967 the Radiotherapy Department will start treatment with the Betatron, the machine which has been purchased from a fund raised by voluntary effort.
- (ii) The Royal Surrey County Hospital, Guildford, offers 207 beds. An average of 160 were occupied daily throughout the year. 11,226 out-patients made 41,569 attendances and, in addition, 26,582 patients attended the Accident Centre. The Hospital carries a staff of Specialists in all branches of medicine and surgery, with the exception of obstetrics and gynæcology, pædiatrics and dermatology.

Supervision of Nursing Homes. Mount Alvernia, Harvey Road, the only Nursing Home in Guildford, offers 78 general and 25 maternity beds. This Home dealt with 1,606 general and 536 maternity patients during the year, some of the latter being delivered elsewhere. Mount Alvernia is registered with the Borough Council and is inspected under the Public Health Act, 1936: a close liaison is kept with the Home. The new Maternity Wing is in course of completion.

Avondale, 9, Sydney Road, Guildford, is a Mother and Baby Home run by the Guildford and Cranleigh Deaneries Association for Social Work, and is registered as a Nursing Home as a technical formality, but no nursing is carried out there; the mothers go to St. Luke's for their confinements. Avondale is subject to periodic inspection and fulfils its purpose well.

#### Infectious Diseases

Infectious cases requiring hospital treatment are normally admitted to Ottershaw Isolation Hospital, though some go to Green Lane Hospital, Farnham, and occasionally elsewhere.

# Notifiable Diseases (other than Tuberculosis) During the Year 1966

		Total cases notified	Cases admitted to Hospital
Scarlet Fever .	 	13	
Pneumonia .	 	10	
Measles	 	290	1
Erysipelas .	 	2	1
Whooping Cough	 	1	
Sonne Dysentery	 	9	
Puerperal Pyrexia	 	2	1
Malaria	 	1	_
			_
		328	3

The total number of notifications of infectious disease compares very favourably with last year's total of 500. As is usual, the largest number was in respect of Measles (290=80%), although this was not a "Measles year", as a comparison with the 1965 figure of 456 cases will show. Measles tends to become more prevalent every other year.

The case of Malaria was contracted abroad.

Poliomyelitis Vaccination. Members of the public are still urged to ensure that they themselves and their children are adequately protected by means of Oral Polio Vaccine, given by mouth—a very simple and wise precaution against this crippling disease, of which there were 91 cases in England and Wales in 1965, with 19 deaths (including 16 deaths in cases contracted in previous years).

But this disease could reappear at any time if the population is not continually reminded of the need to secure protection. Ten years ago, 1956, there were 3,200 cases: this was before the introduction of vaccine.

The oral vaccine is given to infants in three doses at monthly intervals, usually starting at the seventh month as soon as the Triple Vaccine (Diphtheria, Whooping Cough and Tetanus) has been given.

During the year the following oral vaccinations were carried out:—

Primary Course (3 doses) ... 932 Boosters (1 dose) ... 1062

Present indications are that those who have had vaccine by injection in the past should have their immunity raised by two doses of oral vaccine.

Whooping Cough Immunisation. Deaths from Whooping Cough continue to occur in the British Isles, but they have been much reduced since the introduction of effective vaccines in 1954, during which year there were 106,000 cases in England and Wales with 139 deaths, while in 1965 there were only 12,945 cases with 21 deaths. It is nevertheless very much a disease to be feared especially in infancy, and hence the advice to immunise in infancy. Boosting doses are not required.

The following table shows the number of children, in age groups, who received primary immunisation in the Borough during 1966:

0-4 years 5-14 years Total Primary injection ... 709 20 729

Diphtheria Immunisation. Although Guildford had no case of Diphtheria, cases of this disease continue to occur from time to time in this country: they are frequently severe in the unimmunised. It is only by continually urging Diphtheria Immunisation that this disease can be controlled, and it is vital to protect infants, toddlers and school children. Were cases of this disease to occur, the public would be more anxious for their children to be protected, as was the case when Poliomyelitis was more prevalent 10 years ago.

During 1965, the latest year for which figures have been published, there were 25 cases of Diphtheria in England and Wales, with no deaths. Most of the cases occurred in two outbreaks, one in London and one in Kent.

In 20 of the 25 cases the patients had not been immunised at all, 3 inadequately and only 2 had had the recommended injections.

Immunisation against Diphtheria is carried out in infancy and boosting doses are given to toddlers, school entrants and 9-year-olds.

It is vital to reiterate the need for Immunisation as a protection against the symptomless "carriers" who exist in the community.

The following table shows the number of children, in age groups, who received primary immunisation and the number of boosting doses given in the Borough during 1966:

		0-4 years	5-14 years	Total
Primary	 	 721	103	824
Boosting	 	 94	1058	1152

**Tetanus Immunisation.** An increasing number of children are being protected each year against this disease, which is fortunately rare, though extremely serious when it does occur. As the injection is combined with that against Whooping Cough and Diphtheria, there is no excuse for it to be withheld from any child.

The following table shows the number of children, in age groups, who received primary immunisation and the number reimmunised in the Borough during 1966:

		0-4 years	5-14 years	Total
Primary	 	722	447	1169
Re-immunisation	 	93	614	707

Smallpox Vaccination. The policy remains, to encourage the vaccination of all infants: in addition to protecting the infant, this reduces the likelihood of reactions if and when the child is revaccinated later in life, and gives a quicker and more efficient protection to those who may need to be protected as the result of exposure to a case of Smallpox later in life. Vaccination is now advised soon after the child's first birthday.

During 1965, the last year for which figures are available, there were no cases of smallpox in England and Wales. During the summer of 1966, however, there were outbreaks of a mild form of smallpox in the Midlands and this caused international difficulties for travellers: a lot of travellers had to be vaccinated at short notice in order to travel to the Continent, and many a holiday-maker in Rome and Paris had a painful arm which spoilt their holiday! The advice is: get vaccinated well in advance.

The number of children vaccinated in the Borough during 1966 was 741; this is not as high as one would like to see, but it is in line with the figures for the country as a whole.

Tuberculosis. In 1966 there were 11 newly-notified cases of Pulmonary Tuberculosis added to the Register, as against 7 in 1965, and no cases of Non-Pulmonary Tuberculosis (3 in 1965). There were no deaths from either Pulmonary or Non-Pulmonary Tuberculosis during 1966. Cases on the Tuberculosis Register at the end of the year numbered 366 as against 372 at the beginning of the year.

The following table shows the age groups of new cases during 1966:

Age Pe	riods					Pulm M.	onary F.	No pulmo M.	
Under	1							_	_
1-								_	_
2–4		• • • •		•••	• • • •			_	-
5-9	• • •		• • •	• • •		_			
10-14	• • •	• • • •	• • • •	•••	• • • •		1		_
15-19 20-24	• • •	• • •	• • • •	•••	• • •	_			
25-34	• • •	• • •	•••	• • • •	• • • •	1	2		
25-34 35-44	• • •		• • •	• • •	• • • •	1			
45-54	• • •	•••	• • •	• • • •	•••	2	_	_	_
55-64			•••		• • • •		1	_	
65-74						2	i		_
75 & o						_	-	_	_
						6	5	_	-

# The table below may be of interest:

#### New Cases and Mortality 1957-1966

				New Cases	Deaths
1957				21	4
1958				24	3
1959				14	3
1960	•••			17	6
1961	•••			24	3
1962	• • •			11	2
1963	• • • •			14	1
1964	•••	• • •		20	1
1965	• • •	• • •	• • •	10	1
1966				11	

Mr. Edward Jones is still giving valuable service as Chairman of the Guildford Borough, Godalming and Haslemere Care Committee.

In the Guildford Borough assistance was given to patients in various ways. The Committee agreed to grants towards the cost of blankets and the cost of clothing for children who were being sent on holiday and three families were helped with the expense of fares to enable them to have a holiday. Two children in the area went on holiday to Sheephatch Camp School, Tilford, under the scheme organised by the Standing Conference of Care Committees. Fuel grants were given to eleven patients and Christmas gifts to nineteen. Weekly orders for groceries and milk were also arranged. The expense was met in respect of the television licence for two housebound patients, and a grant towards occupational therapy materials was given to another.

As the Committee continues to assist those suffering from non-tuberculous chest conditions as well as the tuberculous, the need for financial support increases, but the results of the 1966 Christmas Seal Sale were very encouraging.

Mass Radiography Service. The weekly visit of a Mobile Mass Radiography Unit each Thursday morning from 10–10.45 at the site in North Street (opposite the General Post Office) which was started in 11th October, 1965, has been greatly appreciated and well attended by the general public. Out of a total number of 1,945 chest X-rays taken during 1966, the findings were as follows:

	Males	Females	Total
Referrals by General Practitioners	127	91	218
Cases of Significant Pulmonary Tuberculosis	1		1
Cases of Primary Lung Cancer	21		21
Attendance by General Public, including Appoint-			
ments made by Employers for staff	555	1172	1727
Cases of Significant Pulmonary Tuberculosis		_	_
Cases of Primary Lung Cancer	1	1	2

B.C.G. Vaccination. This vaccination against Tuberculosis is available for school children of 13 years old and upwards, and for students attending Universities, Teacher Training Colleges and other establishments of Further Education.

Number receiving B.C.G. Vaccination ... 774 Number immune—Vaccination not required ... 33

# Annual Report

of the

Chief Public Health Inspector

for 1966

#### HEALTH EDUCATION

"Health is a state of complete mental, physical, and social well-being and not merely an absence of disease and infirmity." This well-known definition is used by the World Health Organisation.

Physical, mental, and social well-being depend predominantly on a satisfactory and satisfying environment. Public Health Inspectors work to improve the environment in which people live by education and enforcement. We must not take too narrow a view of what we should be doing to improve it. We must tackle those factors which cause the greatest impact on our environment. Those which perhaps have the greatest bearing on a full enjoyment of the environment are poor housing, air pollution, noise, and poor personal hygiene with all the latter implies in dirty food handling, absence of modern amenities such as baths and hot water systems to encourage better personal hygiene and lack of education in childhood to engender the correct outlook to personal hygiene.

Some of these factors, noise for example, may to many people be little more than mild irritants. It is very difficult to assess objectively the adverse effect of noise on our sense of well-being. This is why noise complaints coming to the Health Department are so difficult to deal with. To pop fans in their discothéques, the medley of noise masquerading as music gives a great deal of pleasure; to restless neighbours living near these clubs, this "music" in the small hours of the morning can be nothing less than injurious to health. In Guildford, which has few industries producing noise in sufficient quantity to be a nuisance, probably the greatest noise-producing factor is road traffic. In the town centre the sheer volume of noise can be overwhelming at times for those who happen to work in shops and offices or live in houses overlooking the main thoroughfares.

Correct planning should remove all through-traffic from residential areas, but this is not always so. The convenience of the motorist has often been placed above the comfort and safety of residents, and what should be quiet residential streets have become major thoroughfares at certain times of the day when motorists are rushing to and from work. At the risk of causing slightly more congestion on the major traffic routes, every attention should be given to creating culs-de-sac and no-through-roads wherever possible in residential areas so that they can be isolated from the noise of traffic.

What has all this to do with health education? There are no statutory provisions to cover many of the most irritating inconveniences of modern life. To overcome some of them we must therefore strive to educate rather than to legislate. Thoughtless people must be encouraged to stop and think; for example, the late

night party-goers who slam their car doors and rev engines in the small hours of the morning, the thoughtless neighbour who must have his radio at maximum volume, the teenager on his noisy motor-bike. With a little more sense of responsibility, none of these people would be annoying their neighbours.

Whilst it must be remembered that Health Inspectors are still primarily enforcement officers of the local authority, they nevertheless spend a major part of their time in educating and in furthering public relations. A number of lectures and talks have been given this year, including many talks to school-leavers. Exhibitions have been arranged at the Surrey County Show and in a shop window during the course of the year.

These are useful methods, but it seems to have become more and more difficult to reach people effectively other than through the mass media of radio, television, or newspaper advertising. For example, a recent housing act enabled occupiers of houses to approach the local authority so that their landlords could be required to provide them with bathrooms and hot and cold water supplies. In spite of considerable efforts both locally and nationally to publicise this, only a handful of people have taken advantage of this important new procedure, and most people must be completely ignorant of it. Is this because the impact of advertisements for detergents, new cars, gramophone records, sophisticated foods and the other so-called amenities of 20th century living have swamped the publicity efforts of local authorities who cannot devote enough money to major campaigns similar to those carried on by soap and food companies?

#### HOUSING

Steady progress has been made with the clearance or reconstruction of unfit houses. Parts of the Bright Hill compulsory purchase order have been demolished and there are now few people living in that Area remaining to be rehoused. A number of the worst houses in Castle Street have also been demolished.

During the year the largest new Area inspected and dealt with was in Stoke Fields. Clearance Areas were prepared, but the Council decided not to make compulsory purchase orders at present but to deal with each house individually. The owner of each of the unfit houses was therefore given the opportunity to carry out the necessary reconstruction and repair to give the houses a new lease of life and so far as practicable to provide them with modern amenities. Many owners decided to do this in spite of the very heavy costs involved. In many cases it has cost more than £1,500 to carry out the necessary repairs and reconstruction to make the houses fit to live in. In other cases owners have decided that they cannot afford the heavy expenditure involved in making a silk purse out of a sow's ear and inevitably demolition will

follow, and empty and untidy sites will remain for many years to come. This is unfortunately always the result of failure to make compulsory purchase orders so that Areas can be redeveloped as a whole.

Stoke Fields is the only remaining sizeable area within easy reach of the town centre where redevelopment, as a result of the clearance of unfit houses, is likely to take place. There are still many unfit houses in Guildford, but these are scattered and often in short terraces where comprehensive redevelopment will not be possible and where infilling by private developers is the most likely result of clearance. Generally the acute housing shortage in Guildford guarantees that where old houses are found to be unfit and closing or demolition orders made, almost always somebody will be prepared to spend the large sum of money necessary to make them fit for habitation even if they are then left with a doubtful asset of indeterminable life.

The maintenance and improvement of existing houses is a most important part of the functions of the Public Health Inspector. House-to-house inspections have continued during 1966 and as a result many of our older houses have been repaired and owners have been encouraged to carry out improvements. Applications for improvement grants have maintained the average of 1965 and 1964. I would like to see far more applications coming in. At the present rate of progress we are unlikely to see every house in Guildford provided with all standard amenities within the next ten years.

With very few new houses becoming available the Housing Officer has had difficulty in finding suitable accommodation for some of the families remaining in the clearance areas. Inevitably many occupiers are elderly and some widows or widowers, and these are always the most difficult to rehouse.

By the 31st January, 1967, the Council had provided 4,711 dwellings of which 3,250 are post-war houses. During 1966, 49 units of accommodation were handed over by the builders, of which 11 were houses for sale.

As a result of the Committee's decision to revise their Points Scheme, and the fixing of a minimum level of 130 points, the waiting list of applicants is shown at the 31st January, 1967, to be:

(1)	Families being entitled to consideration of housing	516
	Single adults over 50 years	104
(2)	On an Abeyance List (where waiting periods are being served) families to be eventually transferred to the pre- vious list when various qualifications have been com-	
	pleted	6
		667

### Clearance Programme

During the year 1966, the following action was taken with regard to unfit houses included in the 1966/70 Clearance Programme:

Clearance Areas and Compulsory	No. of Houses	Families Displaced	Houses Demolished	Houses made fit
Purchase Orders:— Houses included in Clearance Areas represented before 1966 Houses included in Compulsory Purchase Order but outside		* **31 (76)	20	_
Clearance Area represented before 1966	_	13 (32)	3	
Individual Unfit Houses:— Closing Orders:				
(a) Buildings	13	1 (3)		1
(b) Parts of Buildings	1	3 (7)	_	
Demolition Orders	14	5 (13)	13	
Undertakings	13	2 (3)		*****
Local Authority Property	3	7 (11)	11	
	44	62 (145)	47	1

<sup>\*=</sup>including tenants died or found own accommodation.

The following table shows the total number of houses included in Clearance Programmes I, II, and III which have been dealt with up to the end of December, 1966:

		Council
Number of Houses in Classes Anna anter	Privately	owned or
Number of Houses in Clearance Areas only:	owned	controlled
Confirmed	70	
Awaiting confirmation	_	
Number of Unfit Houses included in Clearance		
Areas/Compulsory Purchase Orders:—		
Confirmed	199	10
A :	127	
>		
	110	
Closing Order or Demolition Order	119	_
Number of Houses dealt with by Certificates of		
Unfitness by Medical Officer of Health		79
Number of individual Unfit Houses where Under-		
takings have been accepted:—		
Still occupied	12	
Remaining vacant	3	4
Made fit for habitation	11	
Note:—Details of Undertakings vary owing to	* 1	
purchase by the Council and inclusion of some		
properties in Clearance Areas.		
Number of temporary huts demolished	****	201
Number of Houses demolished or closed by arrange-		
ment with owners	11	
	425	294
	443	274

<sup>\*\*=</sup>figures in parentheses show numbers of persons.

# **Improvement Grants**

During the year 59 formal applications for improvement grants were received. The following table shows the position with regard to grants during 1966:

Francis and trade			Standard Grants	Discretionary Grants
Formal applications received:				Grants
(a) owner occupied			 31	_
(b) tenanted			 26	2
Formal applications approved:				
(a) owner occupied			 31	
(b) tenanted			 26	
Formal applications refused:				
(a) owner occupied			 -	-
(b) tenanted			 	2
Improvements not proceeding			 	
Number of dwellings improved	and		•	
grants paid:				
(a) owner occupied			 29	
(b) tenanted			 15	
Total amount paid in grants			 £7,192-5-6	
Average grant per house			 £163-9-2	
Amenities provided with standa	rd gran	ts:		
(a) fixed bath			 41	
(b) shower			 _	
/ / 1 1 1 1 1			 44	
(d) hot water supply (to any	fitting)		 44	
(e) water closet (i) within b			 39	
(ii) accessibl			-	
(f) foodstore			 34	
(-)				

With the co-operation of a local building society an exhibition was arranged in the office window illustrating the advantages of improvement grants and the type of work which could be carried out. I was most grateful for the help given in publicising further improvement grants.

# Rent Act, 1957

Although the provisions of this Act have not been changed, little use is now made of it. During the year only one application was received for a certificate of disrepair which was subsequently issued.

#### CLEAN AIR

During 1966 a part of Guildford Park was inspected to establish the cost and desirability of making a smoke control area.

There was overwhelming support in the area for the principle of smoke control. Informal discussions with fuel suppliers indicated that those living in the area who wished to retain open fires would be able to obtain smokeless solid fuel. Costing was based on the assumption that simple conversions could be made so that this type of fuel could be burned efficiently.

There have been many exhortations from the Government that smoke control areas should go ahead with all speed. Unfortunately, when the freeze came into operation in the middle of 1966 a typically ambiguous circular mentioned, amongst those proposals which could be deferred, smoke control areas. The coming into operation of Guildford's first smoke control area has therefore been delayed. Fortunately, the winter of 1966/1967 has been mild and probably less coal than usual has been burned.

Thirty houses burning coal put at least one ton of soot into the air at ground level each year—whether they are in Gateshead or Guildford, Middlesbrough or Merrow. In fact, areas in Middlesbrough, Cardiff, Coventry, Hull, Woolwich—to mention but a few—which have smoke control, are cleaner than Guildford which has none.

All plans submitted for building regulation and planning approval are examined to ensure that boiler chimneys are built to sufficient height for the effective dispersal of flue gases. Architects and combustion engineers are well aware of the Clean Air Act requirements and there is usually no problem in obtaining agreement. Unfortunately, this cannot always be said of the County Council who are often most difficult to convince that school boilers, like others, produce harmful gases which must be dispersed at a safe height. Which is more important—public health or aesthetic considerations?

Many complaints have been received about the nuisance caused by garden bonfires. Efficient gardeners do not burn garden waste, they compost it and return it to the soil. There is little need for bonfires and even less for the garden incinerator which smoulders away for hours on end discharging choking smoke into the air and filling bedrooms for hundred of yards around. Any trimmings which must be burned should be stored until they are thoroughly dry when they can usually be burnt without smoke. Household waste should be put in the dustbin from which it will be collected regularly and efficiently.

There has been a move towards on-site incineration of refuse. Those who are aware of the serious pollution problems this system of refuse disposal has caused in America will view its introduction with caution. Properly constructed incinerators with after-burners to consume smoke and obnoxious gases are obtainable but at a price beyond what most developers are prepared to pay. One new incinerator used for burning paper and wrapping material in a large shop in Guildford has produced enough smoke already to emphasise the need for special precautions in approving this type of installation.

I am unable to include the usual tables of comparison for 1966 because the information used is not yet available on a national basis.

#### **GUILDFORD SLAUGHTERHOUSE**

Slaughtering facilities continued to be provided throughout the year at Guildford Slaughterhouse where animals were dressed on the line system on behalf of owners by the Council's slaughtering contractor.

The total number of animals slaughtered during the year showed an increase over 1965 of 4,155 due mainly to the fact that 4,936 more sheep were slaughtered.

Cattle and calves also showed a slight but not significant increase. The throughput of pigs, however, was reduced by 1,086 mainly due to the fact that there was no slaughtering for outside sources as in the previous years.

Cold room and hanging facilities again presented problems, resulting in the unnecessary and undesirable handling of carcases.

Slaughtering continued without the necessity of undue overtime. Publicly-owned slaughterhouses are not controlled by new legislation as is the case with private slaughterhouses where local authorities may control hours of slaughtering in premises within their districts. It is possible to foresee in the near future slaughtering being brought into line with other industries and working a five-day week.

Slaughtering was again carried out prior to Christmas for the Royal Smithfield Show in London.

# **Meat Inspection**

Full-time 100% meat inspection continued to be carried out by the Senior Meat Inspector with assistance, as necessary, by

other Public Health Inspectors.

The charges levied for meat inspection totalled £1,988 16s. 5d., and this, despite the charges being lower than the maximum permissible, approximately balanced the cost of meat inspection for the year so that there was again no burden on the ratepayer for this vital service.

The following table shows the number of animals inspected and condemnations made during the year. A total of 47 tons 16 cwt. 97 lbs. of meat was condemned as unfit for human con-

sumption

sumption.				~		
	Cattle ex. Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed and inspected	8,034	787	556	18,240	26,448	54,065
All Diseases except Tuber-						
Whole carcases	5	19	18	35	73	152
Carcases of which some part					0.404	4 4 5 40
or organ was condemned Percentage of number in- spected affected with disease other than Tuber- culosis and Cysticercus	3,346	368	7	1,596	9,431	14,748
	41.65	49.05	4.50	8.99	35.93	27.56

	Caule ex Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Tuberculosis						
Whole carcases	_	_	_	_	_	_
Carcases of which some part or organ was condemned	1	1	_	_	75	77
Percentage of number in- spected affected with Tuberculosis	0.012	0.13	_	_	0.28	0.14
	0.012	0.10			0.20	
Cysticercus bovis Carcases of which some part or organ was condemned	15	_	_	_	_	15
Carcases submitted for treatment by refrigeration	15	_	_	_	_	15
Generalised and totally con- demned	_	_	_	_	_	

#### Diseases other than Tuberculosis

There was little change either in the incidence or variety of disease encountered during meat inspection. Parasitic infestations and localised infections of the organs were predominant in cattle. Condemnations of whole carcases occurred mainly in animals sent in for emergency slaughter.

Parasitic infestations in sheep were again the major cause for condemnation either as a localised condition, or as the main con-

tributory factor in the total condemnation of carcases.

In pigs pneumonia and parasitic liver conditions account for the bulk of condemnations, the latter being caused by the degenerated larvae of the round worm ascaris lumbricoides. There is also an increasing incidence of pyæmic conditions in pigs warranting the condemnation of whole carcases. This is due in many cases to what appears to be an increasing habit amongst pigs of tail biting, the tail subsequently becoming infected, resulting in multiple abscesses throughout the carcase. Recent changes in the Meat Inspection Regulations require the splitting of carcases showing evidence of abscesses or tail biting, together with a more detailed examination of the carcase.

#### **Tuberculosis**

The fact that this disease appears to be almost non-existent in food animals presents considerable difficulty to the student meat inspector. Specimens of the disease are all too rare for him to see and most of his knowledge must be gleaned from text books, which still devote considerable space to the subject.

In recent years the majority of affected cattle have been animals of Irish origin, but even these are now diminishing due to the eradication measures being taken by the Irish Government.

In pigs once again lesions were found to be localised in the head, and they are generally believed to belong to an avian strain.

All the evidence of the disease found at Guildford Slaughterhouse was localised, requiring condemnation of the affected part or organ only. Incidence of the disease is reported to the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food for further field investigation.

# Cysticercus Bovis

There was a 50% increase in the incidence of this condition found during meat inspection. Recent recommendations in the Meat Inspection Regulations require the treatment of carcases only where viable or caseous cysts are detected but not where calcified or non-cystic caseous lesions exist. The existence of the cyst in cattle presupposes infection of humans by the parent tapeworm, but these are rarely reported.

Facilities for the treatment of affected carcases still exist at the Slaughterhouse in the F.M.C. (Meat) Ltd. cold room, although many carcases are removed to other premises. In these cases the appropriate local authority is contacted with a request to supervise the necessary treatment.

#### **Laboratory Facilities**

Specimens for bacteriological examination were sent to the Public Health Laboratory during the year and examination was requested on six pigs and two cattle with negative results.

Specimens were also sent to the University Veterinary Hospital, Glasgow, where an investigation was being carried out into the incidence of lymphosarcoma in food animals. Five specimens were sent, of which three were reported to be positive.

# Hygiene

The repairs and redecorations to the Slaughterhouse were not undertaken during the year except for the resurfacing of the floors in the slaughterhall, pre-cooler, and two cold rooms. The premises will close during the early part of 1967 so that this work, together with alterations to the lairage, pre-cooler and the provision of a cutting room, can be completed.

It is essential that this work be carried out not only from the hygienic aspect, but also for the welfare of the animals awaiting slaughter and to bring the slaughterhouse into line with more modern premises. Legislation requiring the spraying of carcases, instead of as at present, wiping with cloths, will also make it necessary for the cooling and hanging facilities to be re-appraised so that adequate drying and cooling can be achieved. It is very difficult to produce a clean carcase if the live animal is filthy, and it is for this reason that more covered lairage has now become essential.

#### DISEASES OF ANIMALS

Outbreaks of foot and mouth disease during the year involved this Department in considerable extra work and cost. Checks must be made at the Cattle Market to make sure that no animals are brought from infected areas. Extra vigilance is also needed at the Abattoir. Extra cost is involved in the extensive advertising required by the Minister of Agriculture and Fisheries to publicise the boundaries of infected areas.

Part of the control of the spread of infection in animals and poultry depends upon the adequate sterilisation of swill used as food. Boiling plants must be efficient and must be licensed by the Council. One new licence was issued this year.

There are two licensed Pet Animals Shops and two Animal

Boarding Establishments.

#### DISINFECTIONS

The steam disinfector has proved its usefulness again. Although the number of articles disinfected is not high, its availability is invaluable not only in the Borough but in adjoining districts which pay a fee for its use.

# Number of Articles Disinfected by Steam:

Wearing apparel Blankets and bedding Pillows and bolsters Sundries		From outside the Borough  24  4  5	Total 51 33 7 8
	66	33	. 99

Number of rooms disinfected after infectious disease

					19
		 l after	non-notifia	ble	25
(Tarrein al	4: -:				25

#### PEST CONTROL

The battle against insect pests continues. None is wantonly destroyed and defensive action is taken only where they are likely to be a nuisance or a health menace.

The following table indicates the number and types of infestations treated:-

			Number of Premises Disinfested
Bugs	 	 	 3
Fleas	 	 	 5
Flies	 	 	 10
Wasps	 	 	 121
Ants	 	 	 120
Beetles	 	 	 230
Silverfish	 	 	 4
Lice	 	 	 1

# SANITARY INSPECTION OF THE AREA

From March, 1966, there has been a full staff of Inspectors and this has had a tremendous effect on the value and amount of work done. It has been possible to re-commence essential house-to-house inspections under the Housing Acts, 1957–64, to carry out a number of re-visits of offices and shops and almost to complete the round of initial inspections under the Offices, Shops and Railway Premises Act. During the year the Department took over responsibilities relating to shops' hours of closing, and although this is not onerous there are always a number of enquiries and complaints associated with this to be investigated.

Outbreaks of smallpox in England meant that travellers abroad were required to produce valid certificates of vaccination before they were permitted to enter Continental countries on holiday. These certificates must be countersigned and verified in the Department. Well over 3,000 were dealt with between mid-May and mid-August—at a modest estimate this must have taken 200 hours of work time.

The following statistical information gives an indication of the type of visits carried out during the year:

# Number and Nature of Inspections Made

								No. of Visits
Housing Acts								
First Inspections								328
Re-inspections								394
Overcrowding								21
Improvement grants								435
Council-owned property	ty							50
Rent Act Certificates		• • •						7
Houses in multiple occ	cupation	n						72
Visits re Land Charges								23
Public Health Acts								(12
Nuisances	• • •	• • • •	• • •	• • •	•••	• • •	• • •	613
No nuisances found	• • •	• • •	• • •	• • •	• • •	• • •	• • •	123
Infectious diseases						• • •	• • •	175
Insects and vermin (ex	cluding	Pests	Officer	rs' visit	s)		• • •	92
Drainage work	• • •	• • •	• • •	•••	• • •	• • •	• • •	223
Caravans	•••	• • •	•••	• • •	• • •		• • •	15
Fairs, shows, etc.	:			• • • •		• • •	• • •	12
Places of public enterta		į.	• • •		• • •			11
Common Lodging Ho		• • •	• • •	• • •			• • •	3
Pollution of watercour		• • •	• • •	• • •			• • •	5
Public Conveniences			• • •	• • •	• • •			12
School and public swi	mming	baths						32
E-starian Asta								
Factories Acts								103
Factories	•••	•••	• • •	• • •	• • • •			15
Outworkers	•••	• • •		• • •				13
Offices, Shops and Ra	ilway I	Premise	es Act					
First inspections and a	e-inspe	ctions		11.				624
Accidents investigated	and rej	ported	to the	Minist	ry of l	Labour		16

			21				
							No. of Visits
Food Control							V 10163
Slaughterhouse							 *130
Butchers							 142
Catering Premises							 335
Bakers and Confection							 44
Fish shops—wet and	fried						 82
Ice-cream premises							 63
Dairies, milk shops							 51
Greengrocers	• • •						 67
School Kitchens							 9
Grocers and General	Stores						 314
Licensed premises	• • •	• • •					 87
Mobile Shops	• • •	• • •					 25
Market	····		• • •				 48
Visits re Merchandise	Marks	Act				• • •	 35
Unsound food	•••	•••	• • •	• • •			 20
Labelling of Food	•••	• • •	• • •	• • •		• • •	 40
Complaints re food	• • •	• • •	• • •		• • •		 89
Food sampling		• • •			• • • •		 328
Sundry Acts							
Diseases of Animals							 94
Rodent control							 67
Clean Air							 1126
Noise Abatement							 119
Pet Animals, etc.							 14
Cattle Market							 72
200							
Miscellaneous							50
Lectures, talks, exhib		• • •	• • • •	• • •			 53
Special interviews	•••	• • •			• • •		 269
Other visits	•••	• • •	• • •	• • •	• • •		 762
Old Persons	• • •	• • •	• • •	• • •	• • •	• • •	 7
Hairdressers	• • • •		•••		•••		 3
	4 . 44 .		. 1	D 11		T	

<sup>\*</sup> Additional to attendances by Resident Meat Inspector.

### **INFORMAL NOTICES**

							Served	Complied with
Offices, Shops and	Railwa	y Prer	nises	Act			58	55
Housing Acts							73	103
Public Health Acts							129	26
Food Hygiene					• • •		39	39
Factories Acts		• • •		• • •	• • • •	• • •	13	6
Clean Air Act		• • •		• • •		• • •	2	
Noise Abatement			• • •	• • • •		• • • •	2	I
Prevention of Dam				• • •	• • • •		3	2
Slaughterhouse Hy	giene l	Regulai	tions	• • •	• • •		1	1

# **STATUTORY NOTICES**

# Number of notices served for abatement or abolition of nuisances.

						Served	Complied with
Public	Health	Act.	1936-Section	39	 	 4	2
		,	Section	45	 	 1	-
			Section	93	 	 6	1
Public	Health	Act,	1961—Section	17	 	 1	1

# RATS AND MICE DESTRUCTION Prevention of Damage by Pests Act, 1949

Properties other than sewers:	Type of Non- Agricultural	Property  Agricultural
<ol> <li>No. of properties in district</li> <li>(a) Total number of properties (including nearby premises) inspected following noti-</li> </ol>	20,915	39
fication	926	
(b) Number infested by (i) Rats	856	
(ii) Mice	70	
3. (a) Total number of properties inspected for		
rats and/or mice for reasons other than		
notification	2,269	39
(b) Number infested by (i) Rats	1,103	5
(ii) Mice	862	6

# Summary of Visits to Premises by Pests Officers

		Local hority	Dwelling houses	Business premises	Agri- cultural	Total
First visits Subsequent visits		 3 182	906 758	17 1329	81	926 2350

A new problem has been the inexplicable rise in the pigeon population. Many complaints were received about the nuisance these birds caused, fouling footpaths and buildings and damaging stonework and brickwork. Not altogether successful efforts were made to thin out the population.

# FACTORIES ACTS, 1937-1959

# 1. Inspections for purposes of provisions as to Health made by Public Health Inspectors:

	Number on Register	Number of Inspections	Number of Written Notices	Owners Prosecuted	
(1) Factories in which Sections	1.				
2, 3, 4, and 6 are to be enforced	ced				
by Local Authorities	25	10	2		
(2) Factories not included in					
in which Section 7 is enforce					
by Local Authority		57	8	_	
(3) Other premises in which S					
tion 7 is enforced by Lo					
Authority (excluding o		12			
workers' premises)	12	12			
			Found	Remedied	
Number of cases in which defects	were found:				
			1	1	
			_	_	
Absence of thermometer in work			_		
Absence of washing facilities in	workroom .				
No abstract provided					

			Found	Remedied
Sanitary conveniences:				
(a) Insufficient		 	 	
(b) Unsuitable or defective		 	 3	3
(c) Absence of artificial lighti	ng	 	 2	2
(d) Requiring cleansing	• • •	 	 3	3
		 	 2	2
		 	 1	1
		 	 1	1
	space	 	 2	2
(i) Entrance obstructed		 	 1	1
			16	16
		 	 3 2 1 1 2 1 16	3 2 1 1 2 1 16

#### **Outworkers**

#### Sections 110 and 111

The following table shows the number of Outworkers employed in the Borough during the year, and the types of work done:

(1)	(2) (C)	(3) .5	(4)	(5) . <u>E</u>	(6)
Nature of Work	of outworkers in Augi ired by Section 110 (1)	r of cases of default g lists to the Council	r of prosecutions for to supply lists	r of instances of work esome premises	served
	Number list requ	Number	Number failure	Number of unwholesome	Notices
Wearing apparel — making, etc., cleaning and washing Total	20 20	_	_	_	_

# WATER SUPPLIES

The West Surrey Water Board (formerly the Guildford, Godalming and District Water Board) adopted this new name on 1st June, 1966, and is responsible for Guildford's water supply with the exception of a small area in the Park Barn district where the responsibility for distribution rests with the Woking and District Water Company, although the water comes from the West Surrey Water Board's sources.

Apart from a small supplementary supply which comes from boreholes sunk in the Lower Greensand near Albury, all water for Guildford is supplied from boreholes sunk in the chalk at Josephs Road Pumping Station on the bypass, Dapdune Pumping Station

and Millmead Pumping Station.

Construction of a river water abstraction and treatment works is about to commence at Shalford, and when complete the output will be used to augment the Guildford supplies when and where required.

During the year 23 routine samples of water for chemical analysis and 58 samples for bacteriological examination were taken from the undermentioned sources (these samples are taken by the Public Health Department and are additional to the routine samples taken by the Water Board):

		Chemical Satis.	I Samples. Unsatis.	Bacteriologi Satis.	cal Samples. Unsatis.
Ladymead Pumping Station		3		3	_
Dapdune Pumping Station		3		1	_
Millmead Pumping Station		2	_	2	_
Branch hydrant at cinema		1		1	-
Seepage in field				1	_
School tap		_	_	1	
Private Premises:—					
Deep wells		2		_	
Private houses	• • •	8	-	13	
		19		22	

There are two Public Swimming Baths in Guildford-

- (1) Castle Street Baths, owned by the Corporation. Eleven slipper baths are available at these premises.
- (2) Guildford Lido Open-air Swimming Pool, also owned by the Corporation.

There are also three children's paddling pools, one at Stoke Park and two at Guildford Lido.

Both swimming baths and the paddling pools are supplied with mains water and, with the exception of Stoke Park paddling pool, operate on the "break point" chlorination system. The water in Stoke Park paddling pool is chlorinated at frequent intervals during the summer season.

During the year the following samples of swimming bath waters were submitted for examination:

	Chemica Satis.	I Samples. Unsatis.	Bacteriologi Satis.	cal Samples. Unsatis.
Stoke Park Lido Castle Street Baths		_	6 20	
Private School Swimming Bath	1	_	5	1
	4	_	31	5

Some schools have swimming baths and although there are no statutory powers to enable the Health Department to exercise control, principals and head teachers are usually pleased to make use of the service we offer to analyse the water.

In addition to the chemical samples submitted for examination numerous checks are made by Inspectors for chlorine content on the spot.

### DRAINAGE AND SEWERAGE

## Sewage Disposal Works

The Borough Engineer reports that the Works are maintaining a reasonably satisfactory effluent with treatment for approximately  $3\frac{1}{2}$  million gallons per day.

## Cesspools

The number of cesspools and private disposal plants in the Borough at the end of December, 1966, was 114. Cesspools are emptied by mechanical means as and when required. The use of this service appears to be increasing.

### PUBLIC CLEANSING — REFUSE DISPOSAL

Since the reorganisation during the previous year, the refuse collection service has continued throughout the Borough on a weekly basis.

The salvage of waste paper and cardboard has continued and increased with the introduction of a new sorting and baling machine. The price per ton for baled salvage has recently decreased owing to the economic climate of the country generally, but it is hoped that this will only be of a limited duration.

The refuse collection from market traders in North Street has been reorganised and is now being done by means of a closed refuse type of vehicle instead of the old open lorry previously used. It is hoped that this will be much more hygienic and that the service given will be considerably better.

The collection of large items of furniture is increasing considerably as householders become aware of the service available.

### **Public Conveniences**

A number of complaints have been received about the inadequacy and unsatisfactory condition of the public conveniences in Guildford.

The Ward Street and Tunsgate conveniences are now the only ones available in the town centre and they are very heavily used. This places a great strain on the cleaning services. There is no convenience in the area of Upper High Street, a situation which is clearly to be deplored. In this part of the town there are three car parks, one at Foxenden Quarry, one at the Civic Hall, and one at the Municipal Offices, and invariably the first thing that most people look for on completing a journey by car is a toilet, particularly if there are small children in the car. A similar situation exists at Guildford Park.

Whilst the difficulty of finding suitable sites is appreciated, the provision of additional public conveniences must have a high priority in any future development.

## THE OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

TABLE A.

Registrations and General Inspections.

Class of Premises Offices Retail shops	10	Total number of registered premises at the end of year 327 438	Number of registered premises receiving a general inspection during the year 45 350
Wholesale shops, ware- houses Catering establishments	2	29	13
open to the public canteens Fuel storage depots	, 3 0	64	38 0
	35	861	446

### TABLE B.

Number of visits of all kinds by inspectors to registered premises 624.

### TABLE C.

## Analysis of persons employed in registered premises by workplace.

Class of Workplac	ce			Number of Persons Employed
Offices				4,431
Retail shops				3,622
Wholesale departments,	wareho	uses		305
Catering establishments			the	
public				779
a				90
Fuel storage depots				22
Total				9,249
Total males				3,968
Total females				5,281
Total Total males				9,249 3,968

Registration. The low figure for registration received during the year reflects the fact that the bulk of registrations were received during 1964. Those shown as newly registered were generally picked up during routine inspections and the majority relate to change of occupier at premises already on the register. The total of registered premises remained remarkably constant despite the opening of new premises. This is because duplicated registrations were removed from the register. Such a possibility is due to registration by both the local branch and the head office of a multiple concern. There is still a minority of occupiers oblivious to the need for registration.

Inspection. The total of general inspections increased compared with the 1965 figure. It was at a reasonable level although staff effort was concentrated in the summer upon duties under

another enactment. It is hoped that all registered premises will have received an initial general inspection during the forthcoming year. Inspections again covered a general cross-section of the classes of premises within the Council's jurisdiction.

**Operation of the Act.** Again the standard of premises proved fairly good, with older premises posing the greater problems—none of them insurmountable. Again there was no necessity for exemptions from provisions of Sections 5, 6, 9 and 10.

Of the general requirements, provision of hot water was the most frequent necessity, together with adequate ventilation of sanitary conveniences. Lighting arrangements vary greatly and instances of glare from pendant electrical points, either unshaded or with an unsatisfactory shade, were met. This was the case particularly in large, formerly domestic premises, which otherwise make quite satisfactory office accommodation. In some instances additional lighting was requested at certain positions, e.g. filing cabinets.

Most of the prescribed dangerous machines were found to be suitably guarded and no difficulty was met in securing suitable guards for those found to require attention. The accident reported in 1965 which concerned a conveyor belt discharging to a set of idle rollers led to protracted efforts to secure correct safety arrangements. A solution was provided only after a threat to secure an Order under S. 22 of the Act prohibiting further use of the machinery—an unpopular prospect as the occupier handled large volumes of packaged goods. The occupier of premises containing a dangerous hoist, mentioned in the report for 1965, ceased business activities and the property remains vacant.

The requirements relating to provision of information for employees are generally complied with only by large concerns with a chain of premises.

Accidents. The necessity for accident notification is not generally realised. A majority of notified accidents concerned sprains and strains suffered whilst handling goods, followed by accidents in the use of hand tools.

**Prosecutions.** It was not necessary to initiate any legal proceedings during the year under review.

## FOOD AND DRUGS ACT, 1955

### FOOD SAMPLING

From time to time it is suggested that food sampling ought to be centralised under a Government department to economise and to prevent unnecessary sampling and overlapping between adjoining authorities. This sounds attractive until one stops to think of the vast and sophisticated nature of modern foods and drugs. Many of these suffer chemical changes during storage, many may be found in fairly restricted areas because of local quirks or fashions in eating habits, many are manufactured and sold within such a small area that a central Authority might never hear about them. All arguments therefore point to continued local sampling. It is not an expensive procedure, samples are usually taken by an Inspector during the course of normal visits and whilst at the premises he often notices food hygiene problems or other failings which need his attention.

During 1966 the national survey for pesticide residue in foods was commenced. It is too early to know what will emerge from this very extensive investigation. Locally all samples examined have proved negative.

Again, labelling faults seemed to be the most predominant failings in the samples examined by the Public Analyst.

It is most reassuring that no milk samples were found to contain antibiotics. This may be due to sampling coverage or to the useful publicity obtained when successful prosecutions were taken during 1965. These prosecutions undoubtedly brought to producers' notice the need to be particularly careful.

The table opposite gives an indication of the wide nature of foods sampled during the year.

		ne	ine			ne	ne
Sample	No. Taken	Genuine	Not Genuine	Sample	No. Taken	Genuine	Not Genuine
	ZH	9	20		ZË	9	ZÜ
Acetic acid 50% solu- tion	1	1	_	Milk, Channel Island Pasteurised	2	2	_
Angelica Baking powder	î	1		Milk, Channel Island			
Angelica	1	1		untreated	51	51	_
Blackcurrant and apple	1	1	_	Milk, instant * Milk, instant low fat Milk, Nestle's Milk, Pasteurised Milk, Pasteurised homo-	2 2	2 2	
filling Blancmange powder	1	1	_	Milk, Nestle's	1	1	_
Bolognese sauce Breakfast spread	1	1	_	Milk, Pasteurised	1	1	_
Butter	i	1	_	genised	1	1	_
Butter Butter, rum flavoured	1	1	_	* Milk, instant non-fat	1	1	
Butter, rum flavoured Cal-fresh Cauliflower Cetaylex cream	1	1	_	* Milk, instant non-fat Milk, Redi Milk, Swedish diet	1	1	_
Cauliflower	i	i	_	Milk, Swedish diet Mussels	i	1	_
* Chicken mince	`1	1	-	Nutter Olive Oil	1	1	
Cheese, cream Chewing gum	- 1	1		Olive Oil	1	1	
Chocolate vermicelli	i	i		* Pancake and batter mix Pancake, potato	1	1	
Chocolate vermicelli Cocoa Coconut, creamed Coffee and chicory mixture Coffee, instant	1	1	_			1	
Coconut, creamed	1	1	_	Postum, instant	1	1	
mixture	1	1	1-1	Prunes	î	1	
Coffee, instant	1	1	_	Prunes Pudding, meat Raisins, seedless Raisins, washed seedless		1	_
Corned beef	1	1	-	Raisins, seedless	1	1	
Cornish pasty Cream	i	1	_	Raspberries in heavy	1	1	
Cream, double	2	2	-	syrup	1	1	-
Cream, double Devon	1	1	_	Rice, creamed milk pud-	1	1	_
Cream, imitation	1	i	_	Rice, quick pudding	î	1	
Cream, long life	1	1	-	ding Rice, quick pudding Riz, creme de Roe, lumpfish caviar style	1	1	_
Cream, pure	2	2		Roe, lumptish caviar style	1 2	1 2	
Cream, double Devon	1	1		* Sauce, barbecue	ī	ī	
Cream, pure English	1	1		Salad cream * Sauce, barbecue Sauce, Madere	1	1	
Cream, pure Jersey Cream, real dairy Crumbs, dried Dessert, Mont Blanc	1	1	_	Sausages, beef Sausages, pork * Seafood dressing	1	1	_
Crumbs, dried	î	i	_	* Seafood dressing	2	2	_
Dessert, Mont Blanc	1	1	_	Shrimp-flavoured slices	1	1	_
Drinking chocolate	1	1	_	Soup, cream of chicken Sparkling Spring	1	1	_
* Dressing, society fish Drinking chocolate Efcortelan 1% (ung)	i	i	_	Spice, whole pickling	1	1	_
Fat, cooking	1 2	1	_	Steak, prime mince	1	1	
Froment	1	2 1	_		1	1	
Frost-n-Fill frosting	î	1		Tablets, Aneurin Compound B.P.C	1	1	_
Fruit topping Gelatine	1	1	_	Tablets, Antabuse	1	1	
Ham, chopped with pork	1	1 1	_	250 mg	1	1	
Ham, chopped with pork Ham, devilled paste	1	ī	_	250 mg	1	1	_
Honey Mexican	1	1		Tablets, Crystapen G	1	1	
Honey, Mexican Honey, pure	2	2	_	250 mg	-	•	
Ice-cream powder	1	1	_	Hydrochloride 30 mg.	1	1	_
Jam, fresh fruit straw-	1	1	_	Tablets, Folvite Tablets, Glyceryl	1	1	
berry Jam puff	1	1	=	Trinitrate	1	1	_
Java crackers	1	1	_	Tablets, Hexital	1	1	
Jam puff Java crackers Jelly, pure apple Juice, grape	1	1	_	Tablets, Ismelin 10 mg.	1	1	_
Ketchup, mushroom	i	'n	_	Trinitrate Tablets, Hexital Tablets, Ismelin 10 mg. Tablets, Natex 5 herbal Tablets, Sunerven herbal	1	î	_
Lard, pure	1	1	_	Tea, Mueller's Trifle, fresh cream	1	1	-
Lard, pure American	1	1	_	Truffle. Terrine de foie		1	
Margarine	i	î	_	gras	1	1	_
Marzipan	1	1	- 1	Vegetable juice	1	1	-
Marzipan	1	1	_	gras Vegetable juice Vegetable juice (V8) Vinegale malt	1	1	_
Metercal Millac, instant	1	i	_	Vine leaves	î	1	-
Millac, instant	1	1	-	* Incorrectly lal	helled		
				incollectly la	beiseu.		

### LEGAL PROCEEDINGS

During the year, legal proceedings were instituted in the following cases:—

Act	Offence	Result of Prosecution
Food and Drugs Act, 1955	Sale of sour sausages	
Food and Drugs Act, 1955	Sale of loaf of brea	d
	affected by mould	Fined £15-5-0
Food and Drugs Act, 1955	Sale of loaf of brea	d
	containing safety pin	Fined £13-3-0
Food and Drugs Act, 1955	Sale of Swiss rolls affecte	d
	with mould	Fined £23-3-0
Food and Drugs Act, 1955	Sale of mouldy chicken an	d
	ham pie	Fined £13-3-0
Food Hygiene (General)	Two market men smoking	g
Regulations, 1960	while handling fruit	Fined £4-0-0

### MILK SUPPLY

### Milk and Dairies (General) Regulations, 1959

MILK PRODUCERS WITHIN THE BOROUGH:	Premises on Register at 31st Dec., 1966
Number of Cowkeepers registered with the Ministry of Agriculture, Fisheries and Food Number of local producers holding "Untreated"	3
Licences	Nil 3

## Milk (Special Designation) Regulations, 1960

The following is a summary granted within the Borough:—	of	Designated	Milk	Licences
Dealer's Licences: Untreated (farm bottled)				2
Dealer's (Pasteuriser's) Licences: Pasteurised				2
DEALER'S (PRE-PACKED) MILK LICENCES:				

## Milk Vending Machines

25

Untreated/Pasteurised/Sterilised/Ultra Heat freated

There are two automatic vending machines in the Borough and the conditions of storage and distribution appear to be very satisfactory. The reports on routine samples taken from these sources have been satisfactory with the exception of one sample which failed the test due to refrigeration failure.

## Bacteriological Examination of Milk-Analysis of Results-1966

As in previous years it is evident from the following table that by far the highest percentage of failure to satisfy the prescribed test occurred in untreated milk.

Bacteriological Examination of Milk-Analysis of Results-1966

t Remarks		Failure due to defective refrigerator in vending	onnt
ity Test	Percentage Passed	1	9
Turbid!	Number of samples submitted		11-11
Test	Percentage negative	i	11111
Biological Test Turbidity Test	Number of samples submitted	1	
	Percentage Passed	001	001
e Test	Number Failed	1	11111
Phosphate Test	Number Passed	48	12   13
H. (	Number of samples submitted	84	34
R.T.	Percentage Passed	86	100 90.6 100 100
Blue	bəlis7	-	2
Methylene Blue	Tests Void	1	[ e
Met	Passed	47	48 4 17 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Number of samples	84	34 12 12 2
	Total number of samples submitted	48	34 2 2 2 2
2		:	:::::
	м	:	Island Island
	Type of Milk	:	Channel Channel I
	Тур	Pasteurised	Pasteurised Channel Island Untreated Channel Island Sterilised Homogenised Ultra Heat Treated

## Bacteriological Examination of other Foods

During the year 74 samples of food other than milk and ice cream were taken:—

		No. of samples taken	Satis- factory	Unsatis		Rem	arks	
Boiled ham		1	1		No	pathogens	isolated	
Cheese	 	1	1		,,	,,	,,	
Petits fours	 	1	1	_	"	,,	,,	
Sausage meat	 	6	5	1	5 sa	mples, no	pathogens i	so-
						ed; 1 sam	ple salmone	ella
Cream	 	65	34	31	Dec	colourised	methylene	
					E	lue:—	•	
						0 hrs -18		
						$\frac{1}{2}$ hr -1		
						Ĩ hr −3		
						2 hr −3		
						2½ hrs -4		
						3 hrs -2		

### Bacteriological Examination of Food Shop Equipment

During the year 9 swabs of food shop and dairy equipment were taken. Only one of these, a wooden cutting block, was found to have been contaminated. As a result of our follow-up, the cutting block was replaced by a new one.

Regrettably there is still no statutory standard for fresh cream, although efforts are still being made to provide one. It seems incongruous that ice cream should be subject to standards when fresh cream is not.

### Manufacture and Sale of Ice Cream

There is one registered manufacturer of ice cream in the Borough who manufactures on a small scale, and 196 distributors registered, including two new registrations during the year.

Satisfactory provisions have been made in accordance with the Ice Cream (Heat Treatment) Regulations, 1947 and 1952, and any

contraventions found have been remedied.

During the year 63 inspections were made of ice cream premises and 63 samples taken for bacteriological examination.

The following table shows the result of the bacteriological examination of ice cream samples:

### METHYLENE BLUE TESTS:

Ice Crea	ım, ordinary	(number of sam	ples submitted	i 41):
	Grade 1	Grade 2	Grade 3	Grade 4
Totals	(4½ hrs. +) 26	$(2\frac{1}{2}-4 \text{ hrs.})$	7	4
% passed	(63.4)	(9.7)	(17.1)	(9.7)
/ - A	()	( /	` ′	` '
Soft ice				
Totals	11	3	4	4
% passed	(50)	(13.6)	(18.2)	(18.2)
Totals	Grade 1	onber of samples s Grade 2 3 (13.6)	Grade 3	Grade 4

Investigations were carried out into the processing of the local ice cream supply on the occasions when Grades 3 and 4 were obtained.

All unsatisfactory samples were followed up immediately.

## INSPECTION AND SUPERVISION OF FOOD

## Particulars of Food Premises in the Borough

			Section 16	Registered Milk and
	No. of Premises	No. of Inspections	Food and Drugs Act, 1955	Dairies Regulations 1959
Ice Cream premises	197	63	197	_
Dairies, milk shops	27	51		27
Catering establishments (in-				
cluding factory and school				
canteens)	109	344		
Licensed premises (including				
club premises)	96	87		
Bakers and confectioners	117	44		
Grocers and general stores	70	314		
Butchers and cooked meat				
manufacturers	26	142	26	_
Fish shops—wet and fried	13	82		_
Greengrocers	17	67*		
Slaughterhouse	1	130**		
Mobile Shops	-	25		
	673	1,349	223	27

<sup>\*</sup> Regular weekly visits are also paid to the open market in North Street.
\*\* Additional to attendances by Resident Meat Inspector.

# GUILDFORD HYGIENIC FOOD TRADERS' GUILD

Annual Report for the year ending 28th February, 1967

### ADVISORY COMMITTEE

Chairman: ALDERMAN R. F. SPARROW

### Council Members:

HIS WORSHIP THE MAYOR
(Alderman R. McL. Hardy, J.P.)
COUNCILLOR E. BARNARD
COUNCILLOR C. J. K. BOYCE
COUNCILLOR F. ADAMS
COUNCILLOR MISS CLAYDON

#### **MEMBERS**

Alderman R. F. SPARROW		Butchers.
Mr. S. W. CHRISTOPHER		Fried Fish Dealers.
Mr. A. CROSS	•••	Guildford and District Co-operative Society Limited.
Mr. G. EDWARDS Mr. BURTON		Multiple Traders. National Dairymen's Association (West Surrey Branch).
Miss D. M. RUCK		School Meals Service.
Mr. P. KENT		Union of Shop, Distributive and Allied Workers.
Mr. LIDDICOTT		Ditto.
My. J. A. McDONALD		Sugar Confectioners.
Mrs. E. COXE		Housewives.
Mr. EVANS		Ice Cream Manufacturers and Distributors.
Mr. R. L. WAUGH		Grocers and Provisioners.

Hon. Secretary: H. C. REEVE.

### GUILDFORD HYGIENIC FOOD TRADERS' GUILD

## Annual Report of the Chairman

To: The Mayor, Aldermen and Councillors of the Borough of Guildford and Members of the Guildford Hygienic Food Traders' Guild.

Mr. Mayor, Ladies and Gentlemen,

I normally open this short address with an expression of my pleasure at rendering my annual report of the Guild's activities during the preceding year. This I cannot do on this occasion, as for me it is not a pleasant thought that this is the final A.G.M. of the Guild, and I am sure I will be forgiven if I reminisce a little.

As you all know, the Guild was first formed by the activities of Mr. Perry, who was Chief Sanitary Inspector of Guildford in 1946, and who, after a wide survey of food premises within the Borough in November of that year, was disturbed by the unsatisfactory methods of manufacture, handling and distribution of foodstuffs in the Borough. Several meetings were held between the Council's Health Committee and representatives of food trades organisations, and the interest shown by food traders at these meetings was very gratifying. As a result the Borough Council sponsored the formation of the Guild which was to be operated by an Advisory Committee composed of members of the Health Committee and representatives of the various food trades.

Existing legislation in those days did not go far enough to achieve the necessary standards of food production and marketing desired; so the first job of the Advisory Committee was to make good this deficiency. Many long hours were then spent by Committee members in drawing up Codes of Practice for the various food trades carried on. These Codes of Practice were outlined by the Health Department and then examined in detail by a subcommittee consisting mainly of food trade members. In order to publicise the Guild's activities a Food Hygiene Exhibition was held in February, 1947. This was a great success and was attended by more than 7,000 people. A public meeting, at which the chair was taken by Dr. Charles Hill (the "Radio Doctor"), was also well attended, and gradually the Guild got under way.

Councillor Edward Jones, M.P.S., was elected Chairman of the Advisory Committee, and in his first annual report in 1948 he was able to say that, "The success of the scheme has been remarkable". This success was mainly due to the co-operation of food traders and their employees, whose willingness to comply with the hygienic standards laid down in the Codes of Practice gave great pleasure to the people responsible for the formation and administration of the Guild. The Guild's success did not pass unnoticed and in 1949 the Chairman reported that enquiries about the scheme had been received from more than 400 local authorities and other

bodies whilst some 60 deputations visited Guildford to see the work for themselves. At this time about 42% of the food premises existing had been accepted for trader membership, and this per-

centage grew over the succeeding years.

Times have changed, however, and we now find the Guild's Codes of Practice so laboriously worked out have been left behind by legislation enacted in recent years. Many of our original members are now out of business and the growth of supermarkets and large combines in Guildford has accounted to a great extent for the diminution of our membership. I must admit a decrease in interest in the Guild's activities is also noticeable. This may be accounted for by the high standards of hygiene demanded by legislation and the fact that older trader members are not being replaced by the younger generations. It is interesting to note that we still have some of the original members of the Advisory Committee on that Committee, and to Messrs. Cross and Waugh I give my sincere thanks for their stalwart support over the past twenty years.

I am pleased that Mr. Perry, who has left local government service and gone to the Ministry of Health, has been able to be with us at this meeting. I feel sure that the close co-operation first set up by Mr. Perry between officials of the Public Health Department and the town's food traders will be maintained, and

this should give him great pleasure.

I must also give thanks to the Council of the Borough of Guildford which gave us so much aid, material and spiritual, during the active life of the Guild.

(Signed) FRANK SPARROW.

Chairman of the Advisory Committee.

### GUILDFORD HYGIENIC FOOD TRADERS' GUILD

Nineteenth Annual Report on the Work of the Guild

The Advisory Committee met on three occasions during the year. Uppermost in the minds of those members who attended was always the question of the future of the Guild. Several long discussions were held, but it became increasingly apparent that there was no strong feeling that the Guild should continue. Everybody ocncerned regretted this, but nobody could think of a suitable formula to breathe new life into an organisation which appeared to have lost the support of its members. Finally, at its meeting in January, the Committee decided to make the following recommendation to the Council:

"The Advisory Committee now considers that the aims of the Guild have largely been accomplished and, in view of the fact that general legislation has now overtaken the codes of practice drawn up many years ago, recommends that the Guild be dissolved."

Several members of the Committee at this meeting said that the close and friendly co-operation which there had always been between Council Officers and Trader Members of the Guild was too good to be allowed to dissipate. I thoroughly agree: it is invaluable to know personally the people one is dealing with. I therefore recommended to the Council that regular meetings be held each year, one in the spring and one in the autumn, to which all food traders should be invited so that new legislation could be discussed, old friendships could be maintained, and new problems thrashed out. Of course, whether we work through the Guild or not, we shall still be the same people trying to help you with the same problems.

Public relations is the first arm of public health work. Mr. Smith, the Food Hygiene Inspector, has continued his sterling efforts, particularly with lectures to schools and his constant visits to food premises of all types. A series of lectures has also been held at Guildford House with some success. On behalf of the Guild, I produced a concise booklet on food hygiene called "Health in Your Hands" which was directly aimed at reminding all food handlers of a few basic facts. I have brought copies with me for those of you who may not have seen them. I shall continue to produce news-letters as and when required.

It is fitting that in this last report I should thank all the Trader Members of the Guild who for so many years gave enthusiastic support to the work of the Guild. I believe that without this support, it would have been impossible to achieve the high standard of food hygiene which Guildford has so long enjoyed.

H. C. REEVE,

Hon. Secretary.

### **CLINICS AND TREATMENT CENTRES**

## The Surrey County Council Clinics are as follows:—

### Bury Fields, Guildford.

Cervical Cytology: Thursdays a.m. (By appointment only). Contraceptive Clinic: Thursdays p.m. (By appointment only).

Child Guidance (By appointment only). Child Welfare: Wednesdays and Fridays p.m.

Dental (By appointment only).

Diphtheria Immunisation: School Children at School Medical Clinics; Preschool Children at Child Welfare Clinics.

Eye: Thursdays a.m. and p.m. 1st Fridays a.m. and p.m. and 3rd Fridays p.m. (By appointment only).

School Medical: Mondays a.m. (except during School Summer Holidays). Speech; Orthopaedic; Audiology; Remedial Exercises and Mothercraft (By appointment only).

### North Road, Stoughton.

Cervical Cytology: Wednesdays a.m. (By appointment only).

Child Welfare: Tuesdays a.m. and p.m. (Doctor: p.m. and 1st, 3rd and 5th a.m. only).

Dental: (By appointment only).

Diphtheria Immunisation: School Children at School Medical Clinics; Preschool Children at Child Welfare Clinics.

Mothercraft and Remedial Exercises (By appointment only).

School Medical: 1st, 3rd and 5th Mondays a.m. (except during School Summer Holidays).

## St. Peter's Hall, Almond Close, Stoke Hill, Guildford.

Child Welfare: Thursdays p.m.

### Church Hall, Burpham.

Child Welfare: Wednesdays p.m. (Doctor 2nd and 4th only).

### Village Hall, Onslow Village.

Child Welfare: 1st and 3rd Wednesdays p.m.

## Merrow Village Hall.

Child Welfare: Mondays p.m.

## St. Clare's Church Hall, Westborough.

Child Welfare: Mondays p.m.

## The South West Metropolitan Regional Hospital Board Clinics are

as follows:---

### Chest Clinic, 64, Epsom Road, Guildford.

Mondays and Wednesdays: 1 to 4 p.m.; Fridays: 9 a.m. to 12 noon.

## Venereal Diseases Clinic, Royal Surrey County Hospital, Guildford.

Males: Mondays and Fridays: 5 to 7 p.m.

Females: Mondays: 3 to 5 p.m. Thursdays: 2 to 4 p.m.